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DATE: September 3, 2004

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EMAIL: bbornsen@dsoblaw.com

TO: Mail Stop: AF
Commissioner for Patents

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RE: Application No. 09/317,103
Filing Date: 05/21/1999
Group Art: 2642
Inventor: Tracy Lee Nelson
Examiner: Hector A. Agdeppa
Attorney Docket No. 1176

FAX: 703-872-9306

MESSAGEAttachments: Transmittal Form -- 1 page
Response Under 37 CFR § 1.116 -- Expedited Procedure -- Technology Center
2600 -- 8 pages**IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL 303-938-9999**

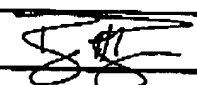
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/317,103
	Confirmation Number	8645
	Filing Date	05/21/1999
	First Named Inventor	Tracy Lee Nelson
	Art Unit	2642
Examiner Name		Hector A. Agdeppa
Total Number of Pages In This Submission		9
Attorney Docket Number		1176

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account 210765 for any required fees.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Brett L. Bomsen, Reg. No. 46,566	
Signature		
Date	September 3, 2004	

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Typed or printed name	Linda L. Leonard		
Signature		Date	September 3, 2004

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